

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services  
Division of Environmental Health, 11 SHS  
(207) 287-5672 FAX (207) 287-4172

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; CAUTION: LPI APPROVAL REQUIRED &lt;&lt;</b>	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE Permit # 1768
Street or Road	ROUTE 184	Date Permit Issued	7/27/15 Fee \$ 265.00 Double Fee Charged ( )
Subdivision, Lot #		Local Plumbing Inspector Signature	Michael Bellamy L.P.I. # 820
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	WHITNEY, LIZ	<input checked="" type="checkbox"/> Owner	<input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State
Mailing Address of	JIM SCOTT COASTAL BUILDERS 393 BAR HARBOR ROAD TRENTON, ME. 04605	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
Daytime Tel. #	(207) 266-1244	Municipal Tax Map #	7 Lot # 14
<b>OWNER OR APPLICANT STATEMENT</b>		<b>CAUTION: INSPECTION REQUIRED</b>	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant: <i>E. Whitney</i> Date: 08/13/2015		Local Plumbing Inspector Signature: _____ (1st Date Approved)	
		Local Plumbing Inspector Signature: _____ (2nd Date Approved)	

## PERMIT INFORMATION

<b>TYPE OF APPLICATION</b>	<b>THIS APPLICATION REQUIRES</b>	<b>DISPOSAL SYSTEM COMPONENT(S)</b>
<input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. < 25% Expansion <input type="checkbox"/> b. ≥ 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
<b>SIZE OF PROPERTY</b>	<b>DISPOSAL SYSTEM TO SERVE</b>	<b>TYPE OF WATER SUPPLY</b>
_____ sq. ft. 50± acres <b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____ Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	TO BE <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<b>TREATMENT TANK</b>	<b>DISPOSAL FIELD TYPE &amp; SIZE</b>	<b>GARBAGE DISPOSAL UNIT</b>	<b>DESIGN FLOW</b>
<input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	<input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device 15 END <input type="checkbox"/> a. Cluster Array <input checked="" type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 1350 sq. ft. <input type="checkbox"/> lin. ft.	<input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	270 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
<b>SOIL DATA &amp; DESIGN CLASS</b>	<b>DISPOSAL FIELD SIZING</b>	<b>EFFLUENT/EJECTOR PUMP</b>	<b>3. Section 4G (meter readings)</b>
PROFILE CONDITION 9 / D at Observation Hole # 1 Depth 12" OF MOST LIMITING SOIL FACTOR	<input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input checked="" type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd	<input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. 44° 30' 00" N Lon. 68° 20' 00" W If g.p.s., state margin of error 30' ±

## SITE EVALUATOR STATEMENT

I certify that on 6-16-15 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature: *William A. LaBelle, Jr.* 319 SE# 6-19-15  
 WILLIAM A. LaBELLE, JR. (207) 537-5900 labelleseptec@rivah.net  
 Site Evaluator Name Printed Telephone Number E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

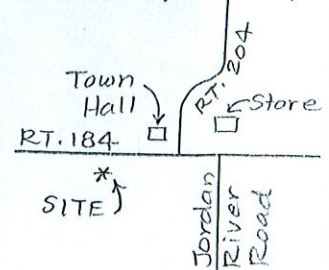


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Owner or Applicant Name  
LIZ WHITNEY

Scale 1" = 50 Ft.

**SITE LOCATION PLAN**  
(Attach map from Maine Atlas  
for First Time System Variance)



(SEE ATTACHED SITE PLAN)

Observation Hole # 1 ☒ Test Pit ☐ Boring

1 1/2 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
CLAY		DARK	
LOAM	FRIABLE	YELLOWISH BROWN (10YR 3/4)	N.E.
TO			COMMON
CLAY	COMPACTED	YELLOWISH BROWN (10YR 5/4)	DISTINCT TO MANY PROMINENT

Soil 9

Profile

Classification D

Condition

Slope 5 %

Limiting Factor 12"

Depth

☒ Ground Water

☐ Restrictive Layer

☐ Bedrock

☐ Pit Depth

Site Evaluator's Signature

319  
S.E. #

Observation Hole # 2 ☒ Test Pit ☐ Boring

1/2 " Depth of organic horizon above mineral soil

	Texture	Consistency	Color	Mottling
0-10	CLAY LOAM TO CLAY	FRIABLE	DARK YELLOWISH BROWN (10YR 3/4)	N.E.  COMMON DISTINCT TO MANY PROMINENT
10-20				
20-30				
30-40				
40-50				
50+				

Soil Classification: S D

Profile Condition: \_\_\_\_\_

Slope: 5%

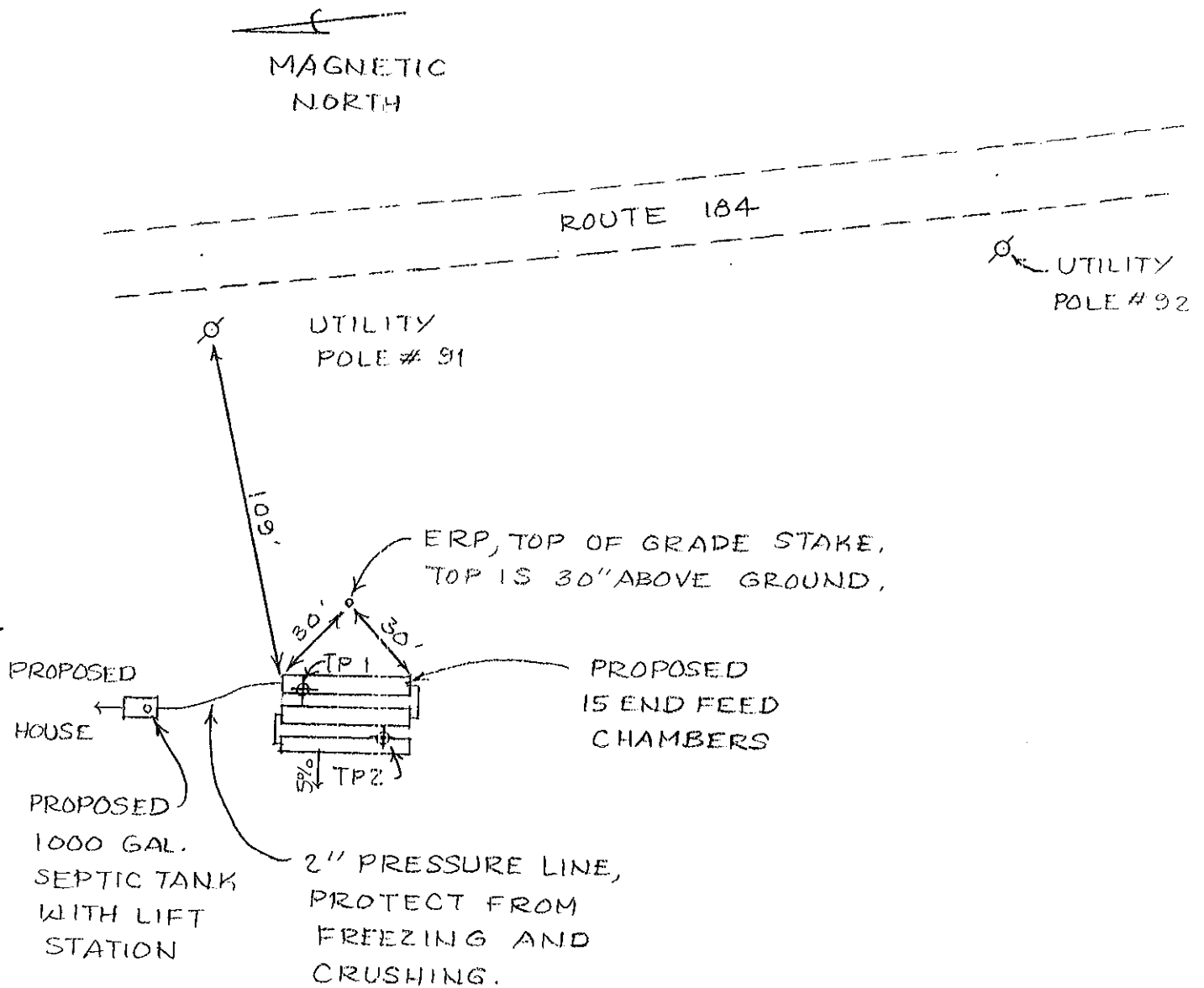
Limiting Factor: 12" Depth

- ☒ Ground Water
- ☐ Restrictive Layer
- ☐ Bedrock
- ☐ Pit Depth

6-19-15  
Date

Town, City, Plantation LAMOINE	Street, Road, Subdivision ROUTE 184	Owner or Applicant Name LIZ WHITNEY
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**SITE PLAN:**  
SCALE: 1" = 50 FT.



NOTE:

CAN GRAVITY FEED,  
IF BUILDING IS SET  
AT AN ELEVATION  
TO ALLOW GRAVITY FEED.

*W. C. L. J.*

Site Evaluator's Signature

319

S.E. #

6-19-15

Date



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Owner or Applicant Name

LIZ WHITNEY

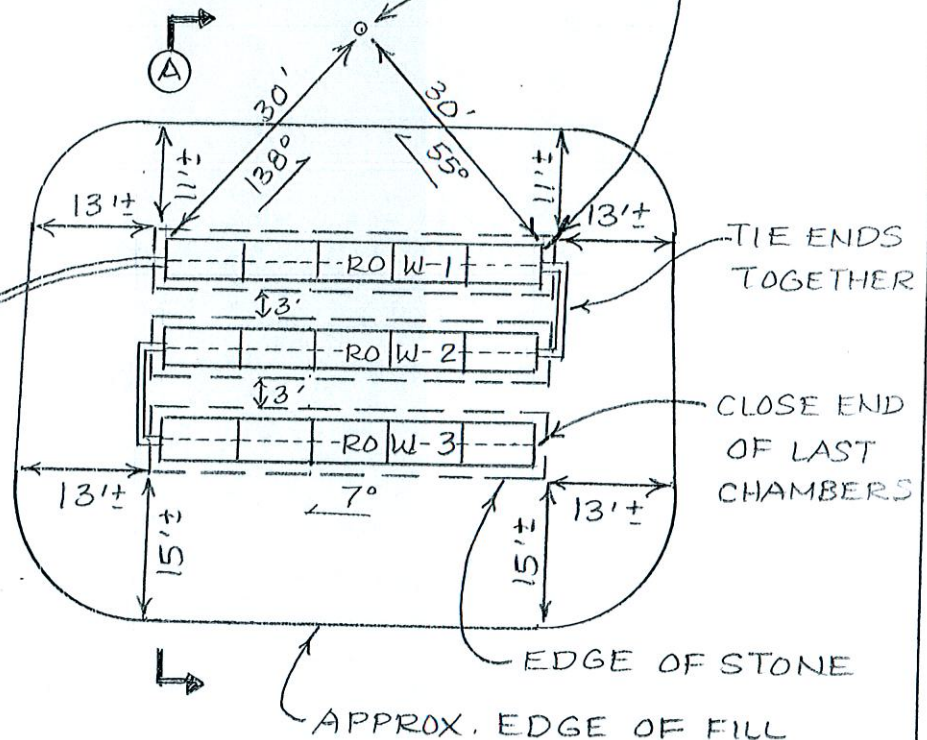
SCALE: 1" = 20 FT.

MAGNETIC NORTH

ERP, TOP OF GRADE  
STAKE. TOP IS  
30" ABOVE GROUND.

PROPOSED HOUSE

PROPOSED 1000 GAL. SEPTIC TANK WITH LIFT STATION



## ELEVATION REFERENCE POINT

Location & Description		
	30"	

ABOVE GROUND . . . TOP OF

GRADE STAKE.

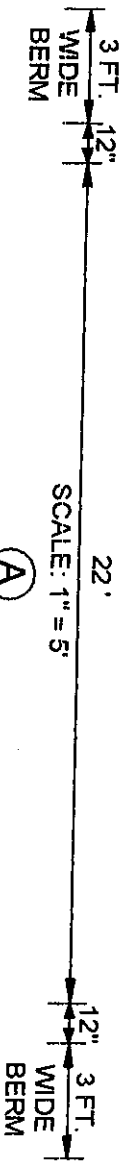
NOTES:

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. Well to be 51' minimum from septic tank(s) and 100' minimum from disposal field.
4. All work done adjacent to wetlands and water bodies must be done in compliance with section 11-M of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPS" (DEPW0588).
5. Install septic tank(s) risers 18" in diameter "minimum" to within 6" of finished grade on inlet, cleanout and outlet covers (recommend extending risers to finish grade). Install risers to finish grade of appropriate size to allow pump removal on all in-tank pump chambers and separate pump tanks.
6. Protect lift stations and pump tanks from freezing.
7. Full basement below grade foundation, frost wall or columns must be 20' minimum from stone around chambers and slab on grade must be 15' minimum from stone around chambers.

-19-15  
Date

NOTE: GRADE UPSLOPE  
TO DIVERGENT SURFACE  
WATER AWAY FROM  
SYSTEM.

# DISPOSAL AREA CROSS SECTION SLOPE 5 %



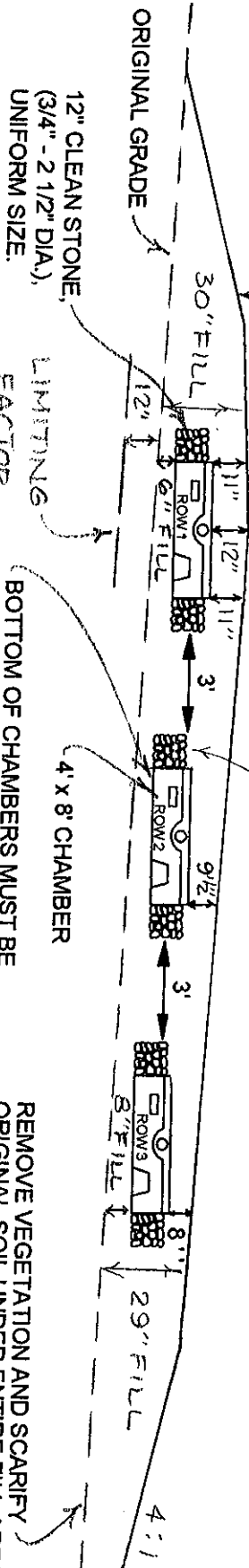
TOP 4" OF FILL TO BE A GOOD LOAM  
SOIL MIX TO ESTABLISH A GOOD  
VEGETATIVE COVER, SEED  
AND MULCH TO PREVENT EROSION,  
SEC. 11-G.

FILL MATERIAL SHALL BE 8"-12" THICK  
OVER CHAMBERS AND SHALL BE GRAVELLY  
COARSE SAND TO THE STANDARDS IN  
SEC. 11-E IN THE SUBSURFACE RULES.

FILL EXTENSIONS  
NO GREATER THAN 4:1,  
(25% SLOPE).

3 %

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F  
RECOMMENDED OVER STONE AND CHAMBERS



12" CLEAN STONE,  
(3/4" - 2 1/2" DIA.),  
UNIFORM SIZE.

LIMITING  
FACTOR

BOTTOM OF CHAMBERS MUST BE  
LEVEL WITH MAXIMUM GRADE  
TOLERANCE OF 2" PER 100'.

REMOVE VEGETATION AND SCARIFY  
ORIGINAL SOIL UNDER ENTIRE FILL AREA,  
SEC. 11-B.

THOROUGHLY MIX, DISK OR ROTO-TILL  
CLEAN, COARSE, SHARP SAND INTO  
TOP 4 INCHES OF ORIGINAL SOIL TO  
CREATE A TRANSITION ZONE, SEC. 11-B.

ELEVATIONS:

ELEV. REF. PT. (ERP):	ROW 1	ROW 2	ROW 3
FINISHED GRADE:	0"	(CROWN -18")	(-25 1/2" MIN.) (-32" MIN.)
TOP OF CHAMBERS:	-30"	-35"	-40"
BOTTOM OF CHAMBERS:	-43"	-48"	-53"

NOTE:

SYSTEM MUST BE INSTALLED ACCORDING  
TO THE RULES AND PRACTICES SET FORTH  
IN THE MOST CURRENT VERSION OF THE  
STATE OF MAINE SUBSURFACE WASTEWATER  
DISPOSAL RULES. INSTALLATION CONTRACTOR  
MUST BE FAMILIAR WITH SAID RULES AND  
CONSTRUCT SYSTEM IN FULL COMPLIANCE  
WITH SECTION 11 OF SAID RULES.

OWNER: LIZ WHITNEY  
LOCATION: LAMOINE

WILLIAM A. LABELLE, JR.  
S.E.# 319

DATE 6-19-15